## **SUmmer Recreation Program**

(5 weeks) July 2 - August 3 (Mon. - Fri.) 9am - 12 noon

## REGISTRATION WEEK APRIL 14 - APRIL 20

Sat. April 14... 9:00am - 12noon (Rec. Hall)

Mon. April 16 - Fri. April 20... 9:00am - 4:00pm (Village Office)

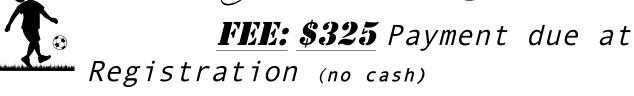
**Due at Registration:** 

- Children current grade K-6
- Proof of age and Lake Grove residency
- · Copy of Immunization record
- · Copy of most recent report card
- Sign a medical waiver



## DON'T MISS OUT (LIMITED SPACE AVAILABLE) LIMITED TIME TO REGISTER

Tell your friends and neighbors!



Payable to Inc. Village of Lake Grove (\$50 admin. fee for any refunds) - Trips optional

Paramedic, EMT, Counselors & CITs (positions limited) Information: **585-2000 EXT 113** 

Camper Registration Forms and Job Applications at Village Hall or at: www.lakegroveny.gov

INCORPORATED VILLAGE OF LAKE GROVE SUMMER RECREATION PROGRAM  AGE GRADE GROUP	
DATE	FOR OFFICE USE
LAST NAME, FIRST	DATE OF BIRTH E-MAIL
ADDRESS	HOME TELEPHONE
SCHOOL	CURRENT GRADE / CURRENT AGE (AS OF 7/5)
☐ VILLAGE RESIDENT FEE \$ SHIRT SIZE	CHILD S M L /EXTRA SHIRT
CHECK #	ADULT SMLXLXXL/ QUANTITY SIZE
PARENTS'/GUARDIANS' NAMES	
FAMILY DOCTOR	TEL. NO
IN CASE OF	TEL. NO
EMERGENCY CONTACTOR	CELL NO.
	TEL.NO.
CELL NO KNOWN ILLNESSES, DISABILITIES, ALLERGIES, ETC	
MY CHILD HAS MY PERMISSION TO PARTICIPATE IN ALL ACTIVITIES EXCEPT:	
DATE SIGNAT	URE OF PARENT OR LEGAL GUARDIAN
RELEASE	
I agree to assume full responsibility for any injuries which might occur to the above named participant () as a result of participation in any activities of the Lake Grove Summer Recreation Program, including but not limited to any claims for personal injuries resulting from or arising out of the negligence or intentional acts of parties other than the Village of Lake Grove and its employees.	

DATE

SIGNATURE